Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

N FOR EXTENSION OF TIMES.

PETITION FOR EXTENSION OF TII	ME UNDER 37 CFR 1.136(a)	Docket Number (Optional)	ber.
QE JC103	In re Application of GENE EDWARD KOUBA		
	Application Number 10/036,795	Filed November 8, 2001	_{
	For Amendment and Response		
	Art Unit 1724 Examiner Davi	d A. Reifsnyder	_
This is a request under the provisions of			-
This is a request under the provisions of identified application.	or CFR 1.136(a) to extend the period f	or filing a reply in the above	
The requested extension and appropriate  One month (37 CFR 1.	non-small-entity fee are as follows (ch	eck time period desired	
One month (37 CFR 1.	17(a)(1))	sHEC	HIVE
	.17(a)(2))	\$ <u>420</u> <b>OCT</b> 2	2003
☐ Three months (37 CFR	1.17(a)(3))	· <del></del>	1
Four months (37 CFR	1.17(a)(4))	\$ TC	1/00
Five months (37 CFR 1		\$	
Applicant claims small entity sta	atus. See 37 CFR 1.27. Therefore, the	e fee amount shown	
A check in the amount of the fe	and the resulting fee is • \$		<b>[</b>
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— Symone by Great Gard. Form			
The Director has already been	authorized to charge fees in this applic	ation to a Deposit Account.	
The Director is hereby authorized	ed to charge any fees which may be re	quired	
or credit any overpayment, to D	eposit Account Number 03-1620	4-1-04,	
I have enclosed a duplicate cop I am the	y of this sheet.		
<u> </u>	f the entire interest. See 37 CFR 3.71		
	37 CFR 3.73(b) is enclosed. (Form PT	0/00/00	
attorney or agent of r	record. Registration Number 35,350	U/28/96).	
attorney or agent und	der 37 CFR 1.34(a).		
	acting under 37 CFR 1.34(a)		
WARNING: Information on this form	may become well to a sur		
WARNING: Information on this form included on this form. Provide credi	may become public. Credit card info t card information and authorization	ormation should not be	
		1/1/1/14	
October 7, 2003  Date	Dulan	1. Achull	ફુ
(025) 022 3121		/ Signature	10036795
Telephone Number		vicinard 3. Schulte	2
		yped or printed name	029
OTE: Signatures of all the inventors or assignees of recore than one signature is required, see below.	ord of the entire interest or their representative(s)	are required. Submit multiple 6	0129 031620 . DA
Total of 1 forms are submitted.			9129 PA